



Village of Clyde
 PO Box 190
 Clyde, AB T0G 0P0
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 www.villageofclyde.ca

The Inspections Group Inc.
 12010 – 111 Avenue NW
 Edmonton, AB T5G 0E6
 Phone: (780) 454-5048 Toll Free: (866) 554-5048
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GAS PERMIT APPLICATION FORM

File Number: _____ Roll Number: _____ Permit Number: _____

Application Date: DD / MMM / YYYY Estimated Project Completion Date: DD / MMM / YYYY

Applicant Type: Owner Contractor Cost of Installation (Labour & Material) \$ _____

The Permit Holder hereby certifies that this installation will be completed in accordance with the Alberta Safety Codes Act. Section 25(1) of the Permit Regulation states: "A permit expires if the undertaking to which it applies: (a) is not commenced within 90 days of issue of the permit, (b) is suspended or abandoned for a period of 120 days." An extension can be considered when applied for in writing prior to permit expiry date.

Owner Name: _____ **Address:** _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

Owner's Signature / Declaration (Single Family Residential Only)
 "I hereby declare I am the owner of the premises in which the work will be conducted, and reside or will reside on the property. I am doing the work myself, and assume responsibility for compliance with the applicable Act and Regulations"

Contractor Name: _____ **Address:** _____
 City: _____ Prov: _____ Postal Code: _____ Phone: _____ Fax: _____
 Cell: _____ Email: _____

Installer's Number _____ Print Installer's Name _____ Installer's Signature _____

Project Location in The Village of Clyde:

Street Address: _____
 Legal Subdivision: Part of: _____ Section: _____ Township: _____ Range: _____ West of: _____
 Subdivision Name: _____ Lot: _____ Block: _____ Plan: _____
 Directions: _____

TYPE OF OCCUPANCY	NUMBER OF OUTLETS:	COMMERCIAL/INDUSTRIAL APPLICATION ONLY	PROPANE INSTALLATION
<input type="checkbox"/> Residential	Furnace _____	Total BTU _____	No. of Tanks _____
<input type="checkbox"/> Farm/Ranch	Water Heater _____	Name of Gas Supplier _____	Tank Size _____
<input type="checkbox"/> Commercial	Fireplace _____	DESCRIPTION OF WORK FOR ALL GAS PERMITS: _____ _____ _____ _____ _____	Serial # _____
<input type="checkbox"/> Industrial	Dryer _____		<input type="checkbox"/> Vaporizer
<input type="checkbox"/> Oilfield/Gas	Unit Heater _____		<input type="checkbox"/> Refill Centre
<input type="checkbox"/> Institutional	Range _____		<input type="checkbox"/> Service Line from Tank to Building
<input type="checkbox"/> Mobile	Room Heater _____		<input type="checkbox"/> Temporary Heat
<input type="checkbox"/> Manufactured	Boilers _____		
	Conversion _____		
	Replacement Appliance _____		
	No. of Secondary Risers _____		
	Barbeque _____		
	Other _____		

Payment Type: Cash Cheque C/C Agreement Interac

Permit Fee: \$ _____

+ SCC Levy*: \$ _____

Total Cost: \$ _____ Receipt #: _____

*\$4.50 or 4% of the permit fee maximum \$560.00

TIGI OFFICE USE ONLY

Issuing Officer's Name: _____

Issuing Officer's Signature: _____

Designation Number: _____

Permit Issue Date: : DD / MMM / YYYY

REMIT PAYMENT AND APPLICATION TO THE INSPECTIONS GROUP INC.

PLEASE CONTACT THE INSPECTIONS GROUP INC. FOR INSPECTIONS ALLOWING 2 – 5 WORKING DAYS NOTICE AND PROVIDE SAFE ACCESS.

The personal information provided as part of this application is collected under the Safety Codes Act and the Municipal Government Act and in accordance with the Freedom of Information and Protection of Privacy Act. The information is required and will be used for issuing permits, safety codes compliance verification and monitoring, and property assessment purposes. The name of the permit holder and the nature of the permit is available to the public upon request. If you have any questions about the collection or use of the personal information provided, please contact the Municipality.